

Please type a plus sign (+) inside this box ☒

UTILITY

PATENT APPLICATION

TRANSMITTAL

Attorney Docket No. IND-54

First Inventor: Jeffrey S. Swayze et al.
Title: IMPROVED CONNECTOR INCORPORATING A CONTACT PAD SURFACE ON A PLANE PARALLEL TO A LONGITUDINAL AXIS

I hereby certify that this correspondence is being deposited today with the United States Postal Service as Express Mail - Post Office to Addressee in an envelope addressed to: Assistant Commissioner for Patents, Box-Patent Application, Washington, DC 20231.

Name: Patricia A. Jara Date: September 28, 2001

Express Mail Label No. ET06846526US

(only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
3. ☒ Specification Total Pages: 22
(Preferred arrangement set forth below)
☒ Descriptive Title of the Invention
☒ Cross Reference to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
☒ Background of the Invention
☒ Brief Summary of the Invention
☒ Brief Description of the Drawings (if filed)
☒ Detailed Description
☒ Claim(s)
☒ Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) Total Sheets 12
5. Oath or Declaration [Total Pages 3]
a. ☒ UNEXECUTED COPY
b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
a. ☐ Computer Readable Form (CRF)
b. ☐ Specification Sequence Listing on:
i. ☐ CD-ROM or CD-R (2 copies); or
ii. ☐ paper
c. ☐ Statement verifying identity of above copies
- ACCOMPANYING APPLICATION PARTS
9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement
(IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certifications under 35 U.S.C. 122
(b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Application Cover Sheet w/Express Mail Certification

18. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.:

Prior application information:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 000027777 or ☐ Correspondence Address belowName: Philip S. Johnson, Esq.
Address: Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003 USA20. TELEPHONE CONTACT Bernard E. Shay
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21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME Bernard E. Shay
SIGNATURE *B.E. Shay*
DATE September 28, 2001

Reg. No. 32,061

FEE TRANSMITTAL*Complete if Known*

Application Number	
Filing Date	September 28, 2001
First Named Inventor	James W. Voegele
Group Art Unit	
Examiner Name	
Attorney Docket Number	IND-54

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	22 - 20 =	0	x 18.00	\$ 36.00
INDEPENDENT CLAIMS	4 - 3 =	0	x 80.00	\$ 80.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$ 826.00

METHOD OF PAYMENT


- ☒ Please charge Deposit Account No. 10-0750/IND-54/BES in the amount of \$826.00. Three copies of this sheet are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/IND-54/BES. Three copies of this sheet are enclosed.

SUBMITTED BY:*Complete (if applicable)*

Typed or Printed Name	Bernard E, Shay
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Reg. No. 32,061

Signature



Date: 9/28/01

**Deposit Account
No. 10-0750**